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Complete and send this form, together with applicable fee(s), to: Mail

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indicated unless corrected l maintenance fee notificatior		in Block 1, by (a	) specifying a new c	orrespondence addres	s; and/or (b) indicating a sep	parate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying		
37804 7590 04/11/2008				papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
Roger H. Chu 19499 Eric Drive Saratoga, CA 95070			Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
						(Depositor's name)
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APPLICATION NO.	ION NO. FILING DATE FIRS		FIRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/700,217	11/03/2003	11/03/2003 V			LSTC-002	3091
TITLE OF INVENTION:						
Method and System for	Distinguishing Effects Du	e to Bifurcation fr	om Effects Due to [	Design Variable Cha	nges in Finite Element Ana	llysis
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	Yes	720		0	720	7/11/2008
EXAMINER		ART UN	IT CI	LASS-SUBCLASS		
Pierre Louis, Andre		2123	2123 703-001000		_	
<ol> <li>Change of correspondence address or indication of "Fee Address" (CFR 1.363).</li> <li>☐ Change of correspondence address (or Change of Correspondent Address form PTO/SB/122) attached.</li> <li>☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT (print of	or type)		
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NOT	data will appear on the fortiling for the filing for the filing for the fortiling for the fortiling for the fortiling for the fortiling for the filing for the fortiling for	he patent. If an assig g an assignment.	nee is identified below, the	document has been filed for
(A) NAME OF ASSIGN	EE	(В	RESIDENCE: (CITY and STATE OR COUNTRY)			
Livermore Software Technology Corp.			Livermore, California			
** *	assignee category or catego	ries (will not be pri	inted on the patent):	☐ Individual ☐ (	Corporation or other private gr	oup entity Government
4a. The following fee(s) are	enclosed:	4b	b. Payment of Fee(s):			
✓ Issue Fee  ☐ Publication Fee (No small entity discount permitted)			☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. Via FFS			
Advance Order - # of Copies			☐ Payment by credit card. Form P1O-2038 is attached. Via EFS☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to			
			Deposit Account Nu	mber	(enclose an extra	copy of this form).
_ ~ ~ ~	(from status indicated above MALL ENTITY status. See	,	☐ b. Applicant is no	o longer claiming SMA	ALL ENTITY status. See 37 C	CFR 1.27(g)(2).
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Authorized Signature /Roger H. Chu, Reg. # 52745/			Date <u>04/12/2008</u>			
Typed or printed name Roger H. Chu			Registration No. <u>52745</u>			
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